

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

09-781925

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS	21	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	21 minus 20 =	1
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

9/24/04 **CLAIMS AS AMENDED - PART II**

	(Column 1)		(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	21	Minus	21	0
Independent	4	Minus	4	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	(Column 1)		(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	20	Minus	21	-
Independent	4	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	(Column 1)		(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	20	Minus	21	-
Independent	4	Minus	4	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	375.00
X\$9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	750.00
X\$18=	18
X84=	80
+280=	
TOTAL	808

RATE	ADDITIONAL FEE
X\$9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

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